



Bib Data Sheet



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APPLICANTS

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** CONTINUING DATA *** *No* *DT*

** FOREIGN APPLICATIONS *** *No* *DT*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

** 04/23/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	Examiner's Signature <i>JT</i> Initials		
STATE OR COUNTRY CO	SHEETS DRAWING 5	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 5

ADDRESS

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TITLE

Adaptive memory allocation

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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